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CONFIRMATION NO. 2433

SERIAL NUMBER	FILING or 371(c) DATE RULE	CLASS	GROUP ART UNIT	ATTORNEY DOCKET NO.
10/520,789	08/22/2005	215	3781	P70361USO

APPLICANTS

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**** CONTINUING DATA *******

This application is a 371 of PCT/NZ03/00151 07/11/2003

**** FOREIGN APPLICATIONS *******

NEW ZEALAND 520113 07/11/2002

**** IF REQUIRED, FOREIGN FILING LICENSE GRANTED ****

Foreign Priority claimed	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Met after Allowance	STATE OR COUNTRY	SHEETS DRAWINGS	TOTAL CLAIMS	INDEPENDENT CLAIMS
35 USC 119(a-d) conditions met	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No					
Verified and Acknowledged	/NIKI MARINA ELOSHWAY/ Examiner's Signature	Initials	NEW ZEALAND	2	1	1

ADDRESS

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TITLE

Fast fit bottle mount

FILING FEE RECEIVED 1030	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees
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